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FACSIMILE TRANSMITTAL SHEET

To:

Examiner Lee S. Cohen

FIRM/COMPANY:

U.S. Patent and Trademark Office - Mail Stop Amendment

FACSIMILE NUMBER:

703.872.9306

CONFIRMATION

TELEPHONE:

703.308.2998

FROM:

Anne Marie Leavy for Edward J. Lynch

DIRECT DIAL:

415.371.2217

DATE:

August 27, 2004

USER NUMBER:

5121

3

FILE NUMBER:

Docket No. R0370-02300

TOTAL # OF PAGES:

(INCLUDING COVERSHEET)

MESSACE:

Attached is a Request for Continued Examination Under 37 CFR

§1.114.

Please confirm receipt of this facsimile.

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CONFIDENTIALITY NOTICE

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| In re the application of |) Examiner: Lee S. Cohen | GENTRAL FAX GENTER | | |
|--|--|-----------------------------|--|--|
| Hill et al. |) Group Art Unit: 3739 | • | | |
| For: HELICALLY SHAPED ELECTROPHYSIOLOGY CATHETER |))) | AUG 2 7 2004 | | |
| Serial No.: 09/847,181 |) REQUEST FOR CONT EXAMINATION UN | | | |
| Filed: May 1, 2001 |) <u>37 CFR §1.114</u> | | | |
| Atty. Docket No.: R0370-02300 |) | | | |
| CERTIFICATE OF MAILES I hereby certify that this these papers are being sent by facety Commissioner for Patents, P.O. Box 1450, Alexande By: | Anne Maric Leavy | π Mail Stop RCE, sco, CA | | |
| Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | | | |
| Dear Sir: | | | | |
| This is a request for continued exacidentified application. | amination (F.CE) under 37 C.F.R. § 1.114 | of the above- | | |
| 1. Submission required under 37 C.F.I | R. § 1.114 | | | |
| a. /X/ Previously submitted | • | | | |
| | ent(s)/reply under 37 C.F.R. § 1.116 previous mentered amendment(s) referred to above v | | | |
| ii. /_/ Consider the argument | s in the Appeal Brief or Reply Brief previo | ously filed on | | |
| iii. // Other: | | | | |
| b. // Enclosed | | | | |
| i. // Amendment/Reply | · . | | | |
| ii. /_/ Affidavit(s)/Declaratio | n(s) | | | |
| iii. // Information Disclosure | e Statement (IDS) | | | |
| iv. /_/ Other: | | • | | |

2. Filing Fees

| Description | re Code | Cia ins. | Extra | Rate | Receive |
|--------------------|---------|------------|-------|--------|---------------|
| RCE Fee | 2801 | | | | \$385. |
| Independent Claims | 2201 | 3 - 3 = | 0 x | \$43.= | \$ 0 |
| Total Claims | 2202 | 27 - 2.0 = | 7 x | \$9.= | \$ 63. |

Fees Due\$448.

- 3. Additional fees: Request for Extension of Time for two (2) months from July 1, 2004 to September 1, 2004 pursuant to 37 CFR §1.17(a)(2), (Fee Code 2253)..........\$210.
 - Total Filing Fees Due\$658.

- 4. Payment of Fees
 - / X / The Commissioner is hereby authorized to charge any fees and to credit any overpayment of fees which may be required under 37 CFR §1.16 and §1.17, to Deposit Account No. 04-1679, referencing Atty. Docket No. R0370-02300. A duplicate copy of this sheet is enclosed for this purpose.
- 5. Address all future communications to:

Edward J. Lynch
DUANE MORRI'S LLP
One Market
Spear Tower, Suite 2000
San Francisco, CA. 94105

| O. | <u>Vi</u> | ner | documents enclosed herewith. | |
|----|-----------|-----|------------------------------|--|
| | /_ | _/ | Other (Specify: | |

Respectfully submitted,

Edward J. Lynch

Registration No. 24,422 Attorney for Applicants

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